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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

□ Declaration OR Submitted with Initial Filing

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number		DE01047	
First Named Inventor		Paul M. Bjorndal	
COMPL	ETE I	F KNOWN	
Application Number			
Filing Date	01/1	6/2004	
Group Art Unit			
Examiner Name			

As a below named inventor, I hereby declare that:										
Ve a mainta intelligati ingrant gangia men										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first a	nd sole inventor (if onl	y one name is listed below)	or an original, fir	st and joint inventor (if plural						
names are listed below) of the s	bject matter which is	claimed and for which a pat	tent is sought on	the invention entitled:						
TRAINING DEVICE F	OR MEDICAME	ENT INHALERS								
the specification of which		le of the formation)								
is attached hereto	(III)	e of the Invention)								
OR										
was filed on (MM/DD/YY	<b>(Y)</b>	as United	d States Applica	tion Number or PCT International						
Application Number	andw	as amended on (MM/DD/Y	~~ [	(if applicable).						
I hereby state that I have review		•								
amended by any amendment sp	cifically referred to ab	OVB.	anea specificatio	n, including the claims, as						
I acknowledge the duty to disclo	e information which is	material to patentability as	defined in 37 CF	R 1.56.						
•										
I hereby claim foreign priority be	efits under 35 U.S.C.	. 119(a)-(d) or 365(b) of ar	ny toreign applic	ation(s) for patent or inventor's						
I hereby claim foreign priority be certificate, or 365(a) of any PCT America, listed below and have al	international application	on which designated at lea	st one country	other than the United States of						
or of any PCT International applic	tion having a filing dat	e before that of the applicat	tion on which pri	ority is claimed.						
		<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>	, — — —							
Prior Foreign Application	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?						
Number(s)	Country	(MM/DDYYYY)	NOT CIAIMING	YES NO						
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1										
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Additional foreign application	umbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached hereto:						
I hereby claim the benefit under	35 U.S.C. 119(e) of ar	y United States provisional	application(s) lis	sted below.						
Application Number(s)	Filing Dat	e (MM/DD/YYYY)								
60/440,831	01/17/2003		Additi	onal provisional application						
		ļ		ers are listed on a						
				emental priority data sheet SB/02B attached hereto.						
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[Page 1 of 2]

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United States United States information with	of Ameri or PCT to nich is m	efit under 35 U.S. ica, listed below nternational appli aterial to patenta l'international fili	and, in: cation is bility as	sofar a n the m s define	s the sub anner pro ed in 37 (	oject matte ovided by CFR 1.56	er of ea the first	ach of th tparagra	ne claims of uph of 35 U.	this appli S.C. 112,	cation Lackno	is not disclosed owledge the dut	; in the phor y to disclose
U.S. Parent Application or PCT Parent Number								iling Dat	е	Parent Patent Number (if applicable)			
Additional U.S. or PCT international application numbers are listed or										ita sheet F	TO/SB		
As a named inv	rentor, I I	nereby appoint th	e follow	nng reg	istered p	ractitioner			this applica	tion and t	o vans		
and trademark	Office C	onnected therew	™: (X)	Custo OR	mer Nur	nber	24	265			<b>&gt;</b>	Place Cust Number Bai	
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Additional	registere	d practitioner(s)	named (	on supp	emental	Registere	d Prac	titioner l	nformation :	sheet PTO	/SB/02	C attached here	eto.
Direct all corr	espond		Custon or Bar			2	4265		OF		orresp	ondence add	ress below
Name	Rol	pert A. Frank	S	Reg.	No. 28	.605							
Address		<del></del>											
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Country					elephor			8-2908		Fax		8) 298-538	
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Name of So	ole or I	irst invento	r:					A petitio	on has bee	n filed fo	r this	unsigned inve	entor
Gi	ven Nai	ne (first and m	iddle (ı	f any])	L				Бал	ily Name	er Si	mame	
Paul M.							Bje	rndal					
Inventor's Signature												Date	
Residence: C	City	Wayne State NJ						ountry	USA			Citizenship	USA
Post Office A	ddress	11 Birkett C	ourt										
Post Office A	ddress												
City		Wayne	State	<u>N1</u>		Z) P	07	170		Cou	ntry	USA	
Additional	invento	rs are being na	amed o	n the	_ 2 sur	pplement	al Add	litional	Inventor(s	) sheet(s	PTO	/SB/02A attac	hed hereto

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_1\_ of \_2\_

Name of Additional Joint Inventor, if ar	ıy:	(	A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]	Given Name (first and middle [if any])					Family Name or Sumame					
Jun		Ch	en		_						
Inventor's Signature Date											
Residence: City Warren	Sta	te NJ	c	ountry USA		Citizenship USA					
Mailing Address 22 Schindelar Woods Way											
Mailing Address	<del>-</del> -										
City Warren	Sta	te NJ		ZIP 07059	Countr	y USA					
Name of Additional Joint Inventor, if an	y:		, כ	A petition has been filed	for thi	s unsigned inventor					
Given Name (first and middle [if any]	)			Family Nam	e or S	urname					
David J. Kenyon											
Inventor's Signature Date											
Residence: City Morristown	Sta	ate NJ	0	Country USA		Citizenship USA					
Mailing Address 4 Log Road											
Mailing Address											
City Morristown	Sta	ate NJ		ZIP ()7960	Cou	ntry USA					
Name of Additional Joint Inventor, if ar	ıy:		Α	petition has been filed t	or this	unsigned inventor					
Given Name (first and middle (if any))				Family N	lame (	or Surname					
Barry N.		Lu	tsk	y							
Inventor's Signature						Date					
Residence: City Hillsborough	Stat	e NJ		Country USA		Citizenship USA					
Mailing Address 31 Longfield Drive				•							
Mailing Address											
City Hillsborough	Stat	e NJ		ZIP 08844	c	ountry USA					

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

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Name of Additional Joint Inventor, if a	ny:		A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any	})			Family N	ame or S	Sumame		
Keith B.			Nol	ор				
Inventor's Signature			Date					
Residence: City Redwood City	Sta	ate CA		Country USA		Citizenship USA		
Mailing Address 701 Baltic Circle, No. 717								
Mailing Address								
City Redwood City	Sta	te C.A		ZIP 94065	Count	y USA		
Name of Additional Joint Inventor, if ar	ıy:			A petition has been fil	led for th	s unsigned inventor		
Given Name (first and middle [if any			Family N	ame or S	umame			
John M.			Stimson					
Inventor's Signature OR M	<u> </u>	<del>-</del> ·				Date 2/26/04		
Residence: City New Providence	Sta	ate NJ	Country USA Citizenship USA					
Mailing Address 99 Hansell Road								
Mailing Address	<del>,</del>							
City New Providence	St	ate NJ		ZIP 07974	Cou	ntry USA		
Name of Additional Joint Inventor, if a	ıy:			A petition has been file	d for this	unsigned inventor		
Given Name (first and middle [if any]	)			Famil	y Name (	or Surname		
Inventor's Signature						Date		
Residence: City	Stat	le	Country			Citizenship		
Mailing Address								
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## **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION

□ Declaration Submitted with Initial

Filing

OR

(37 CFR 1.63)

Declaration
Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		DE01047				
First Named Inventor		Paul M. Bjorndal				
COMPL	ETE I	F KNOWN				
Application Number	/					
Filing Date	01/1	6/2004				
Group Art Unit						
Examiner Name						

	Ann I banabu da ataua Abada										
As a below named inventor, i hereby declare that:											
My residence, post office address, and citizenship are as stated below next to my name.											
believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plurat											
names are listed below) of	names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
TRAINING DEVIC	TRAINING DEVICE FOR MEDICAMENT INHALERS										
the specification of which (Title of the Invention)											
is attached hereto	1,										
OR		<del></del>									
was filed on (MM/D	D/YYYY)	as United	d States Applica	tion Number or PCT International							
Application Number	and w	as amended on (MW/DD/Y)	YY)	(if applicable).							
I hereby state that I have re	eviewed and understand the	contents of the above ident	ified specificatio	n, including the claims, as							
amended by any amendme	ent specifically referred to abo	ove.		_							
I acknowledge the duty to d	disclose information which is	material to patentability as	defined in 37 CF	R 1.56.							
certificate, or 365(a) of any	PCT international application	n which designated at lea-	st one country	ation(s) for patent or inventor's other than the United States of							
America, listed below and ha	ave also identified below, by application having a filing date	checking the box, any forely	an application fo	r patent or inventor's certificate.							
or or any PC1 internationals	splacation naving a ming date	e before that or the applicat	ion on which pri	ority is claimed.							
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?							
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO							
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Additional foreign applica	ation numbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached hereto:							
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[Page 1 of 2]

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United States ( United States ( information wh	I hereby claim the benefit under 35 U.S.C. 120 of any United States application(a), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application.												
U.	S. Par	ent Applicati Numb		PCT	Paren	t .			ing Date /YYYY)			nt Patent N (if applicat	
☐ Additional	U.S. or f	PCT international	applica	tion nur	nbers a	re listed or	a sup	elemental	priority data	sheet P1	ro/sb/	02B attached h	ereto.
As a named inv	entor, I h	ereby appoint th	e followi	ng regi:	stered p	ractitioner	s) to p	rosecute	this application	n and to	transa	ct all business	in the Patent
and Trademark	Office o	nnected therewi	th: 🛛		ner Num	ber	24	265		<b>→</b>	▶ ┌	Place Custo	
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Direct all corr	☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  Direct all correspondence to: ☐ Customer Number or Bar Code Label 24265 OR ☐ Correspondence address below								ress below				
Name	Rot	ert A. Frank	s l	Reg. 1	No. 28	,605							
Address	<del></del>	<del></del>							·				
Address													
City						_ <del></del>	s	tate		ZIP			
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Name of Sc	ole or F	irst Invento	r:					A petitio	n has been	filed for	r this u	insigned inve	ntor
Gi	ven Nar	ne (first and m	iddle [i	anyl)					Family	v Name	or Su	mama	
Paul M.							Bjo	rndal					
Inventor's Signature												Date	
Residence: C	ity	Wayne State NJ					<u>ا</u>	ountry	USA			Citizenship	USA
Post Office A	ddress	11 Birkett C	ourt										
Post Office A	ddress												
City		Wayne	State	NJ		216	07	470		Cou	ntry	USA	
Additional	invento	rs are being na	amed o	n the	2 su	pplemen	al Ade	litional l	nventor(s) s	sheet(s)	PTO/	SB/02A attac	hed hereto

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_1\_ of \_2\_

Name of Additional Joint Inventor, if ar	A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]		Family Nar	ne or S	umame				
Jun Chen								
Inventor's Signature						Date		
Residence: City Warren	Sta	<sub>ite</sub> NJ		Country USA		Citizenship USA		
Mailing Address 22 Schindelar Woods Way								
Mailing Address	- <sub>1</sub>							
City Warren	Sta	ite NJ	ĺ	<b>ZIP</b> 07059	Countr	y USA		
Name of Additional Joint Inventor, if ar	ıy:			A petition has been file	d for thi	s unsigned inventor		
Given Name (first and middle [if any]	)		Family Name or Surname					
David Kenyon								
Inventor's Signature						Date		
Residence: City Morristown	Sta	ate NJ	ىل	Country USA		Citizenship USA		
Malling Address 4 Log Road								
Mailing Address		<u>-</u>						
City Morristown	St	ate NJ		ZIP 07960	Cou	ntry USA		
Name of Additional Joint Inventor, if a	ny:		] A	A petition has been filed	for this	unsigned inventor		
Given Name (first and middle [if any]	)			Family	Name o	or Surname		
Вагту N.		L	utsl	ky				
Inventor's Signature Date								
Residence: City Hillsborough State NJ				Country USA Citizenship USA				
Mailing Address 31 Longfield Drive								
Mailing Address								
City Hillsborough	Stat	te NJ		ZIP 08844	Co	ountry USA		

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_2\_ of \_2\_

Name of Additional Joint Inventor, if any	y:	A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])	···		Family Na	me or S	umame		
Keith B.		Nolc	рр				
Inventor's Khop Signature		· · · · · · · · · · · · · · · · · · ·			Date (22/04		
Residence: City Redwood City	State CA		Country USA		Citizenship USA		
Mailing Address 701 Baltic Circle, No. 717			·				
Mailing Address	<b>Y</b>				** ***		
City Redwood City	State CA		ZIP 94065	Countr	y USA		
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])		Family Name or Surname					
John M.		S	timson				
Inventor's Signature					Date		
Residence: City New Providence	State NJ	Country USA Citizenship USA			Citizenship USA		
Mailing Address 99 Hansell Road							
Mailing Address							
City New Providence	State NJ		ZIP 07974	ZIP 07974 Country USA			
Name of Additional Joint Inventor, if an	y:		A petition has been filed	for this	unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature					Date		
Residence: City State			Country	Citizenship			
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## a valid OMB control number. **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION

Declaration
Submitted after Initial □ Declaration OR Submitted Filing (surcharge (37 CFR 1.16 (e)) required) with Initial Filing

(37 CFR 1.63)

Attorney Docket Nun	mber DE01047
First Named Invento	r Paul M. Bjorndal
COMPL	ETE IF KNOWN
Application Number	/
Filing Date	01/16/2004
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (If only one name is listed below) or an original, first and joint inventor (If plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
			ent is sought on	the invention er	itnieo:					
TRAINING DEVICE FOR MEDICAMENT INHALERS										
the specification of which (Title of the Invention)										
is attached hereto	(7/100 5/1/10 7/75/100/7									
OR was filed on (MM/DD/YY)	Y)	as United	d States Applicat	ion Number or (	PCT International					
Application Number	and v	vas amended on (MM/DD/Y)	vvv [		(if applicable).					
I hereby state that I have reviewe	d and understand the	contents of the above ident		n, including the	_ ` ` `					
amended by any amendment spe	cifically referred to at	oove.								
I acknowledge the duty to disclos	e information which is	material to patentability as	defined in 37 CF	R 1.56.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	opy Attached?					
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Additional foreign application n					reto:					
I hereby claim the benefit under			application(s) lis	ted below						
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[Page 1 of 2]

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.													
U.S.	Pare	nt Application		PCT	Parent				ing Date /YYYY)			nt Patent N (if applicab	
110111001													
Additional U.	Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.												
As a named invent	tor, I he	ereby appoint the	followi	ng regis	stered pr	actitioner	s) to p	rosecute	this applicatio	n and to	transac		
and Trademark Of	ffice co	nnected therewiti	n: 🛛	Custon OR	ner Num	ber	24	265		$\longrightarrow$	<b>-</b>	Place Custo Number Bar	
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Name of Sole	e or F	irst invento	r:					A petitio	n has been	filed fo	r this u	ınsigned inve	ntor
Give	n Nan	ne (first and mi	ddle (i	fany])					Family	y Name	or Su	mame	
Paul M.							Bj	orndal					
Inventor's Signature									· • • • • • • • • • • • • • • • • • • •			Date	
Residence: Cit	у	Wayne			State	NJ		Country	USA			Citizenship	USA
Post Office Add	iress	11 Birkett C	ourt										
Post Office Add													
City		Wayne	State	NJ		ZI	<b>p</b> 07	470		Cou	ntry	USA	
Additional in					2 su	pplemer	tal Ad	ditional	Inventor(s)	sheet(s	) PTO/	SB/02A attac	hed hereto

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Pto/SB/02A (11-00)

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_1\_ of \_2\_

Name of Additional Joint Inventor, if any:									
Given Name (first and middle [if any])		Family Nam	ne or S	umame					
Jun Chen									
Inventor's Signature					Date				
Residence: City Warren	State NJ		Country USA		Citizenship USA				
Malling Address 22 Schindelar Woods Way									
Mailing Address									
City Warren	State NJ		ZIP 07059	Countr	y USA				
Name of Additional Joint Inventor, if an	y:		A petition has been filed	l for thi	s unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname							
David J. Kenyon									
Inventor's Signature					Date				
Residence: City Morristown	State NJ		Country USA		Citizenship USA				
Malling Address 4 Log Road									
Mailing Address									
City Morristown	State NJ		zip 07960	Cou	ntry USA				
Name of Additional Joint Inventor, if an	y:	□ A	petition has been filed	for this	unsigned inventor				
Given Name (first and middle [if any])			Family N	Vame o	or Surname				
Barry N.	I	Lutsk	cy		,				
Inventor's Signature Date 2 Hoz 0 9									
Residence: City Hillsborough		Country USA		Citizenship USA					
Mailing Address 31 Longfield Drive									
Mailing Address									
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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_2\_ of \_2\_

			<u> </u>					
Name of Additional Joint Inventor, if any:			A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]			Family N	ame or	Sumame			
Keith B.			Nolo	p				
Inventor's Signature	•					Date		
Residence: City Redwood City	Sta	te CA		Country USA		Citizenship USA		
Mailing Address 701 Baltic Circle, No. 717								
Mailing Address								
City Redwood City	Sta	te CA	ļ	ZIP 94065	Count	ry USA		
Name of Additional Joint Inventor, if an	ıy:			A petition has been fi	led for th	nis unsigned inventor		
Given Name (first and middle [if any]	)			Family N	ame or	Surname		
John M.			Stimson					
Inventor's Signature						Date		
Residence: City New Providence	Sta	ate NJ	Country USA			Citizenship USA		
Malling Address 99 Hansell Road								
Mailing Address								
City New Providence	Sta	ate NJ		ZIP 07974	Co	untry USA		
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Given Name (first and middle [if any])	)		Family Name or Surname					
Inventor's Signature						Date		
Residence: City State			Country Citizenship			Citizenship		
Mailing Address								
Mailing Address						· · · · · · · · · · · · · · · · · · ·		
City	Stat	e		ZIP	c	ountry		

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#### Attorney Docket Number | DE01047 **DECLARATION FOR UTILITY OR** First Named Inventor Paul M. Bjorndal **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** 01/16/2004 Filing Date

Declaration
Submitted after Initial Declaration OR Submitted Filing (surcharge (37 CFR 1.16 (e)) required) with Initial Filing

**Group Art Unit Examiner Name** 

As a below named inventor, I hereby declars that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural										
names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: TRAINING DEVICE FOR MEDICAMENT INHALERS										
the specification of which	the specification of which (Title of the Invention)									
is attached hereto	( - 100	of the meaning								
OR was filed on (MM/D	D/YYY)	as United	d States Applica	tion Number or PCT International						
Application Number		as amended on (MWDD/Y)		(if applicable).						
l	eviewed and understand the	•								
	nt specifically referred to abo		moo spoomoatto	n, modeling the claims, as						
I acknowledge the duty to d	lisclose information which is	material to patentability as	defined in 37 CF	R 1.56.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
Additional foreign applica	ation numbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached hereto:						
	under 35 U.S.C. 119(e) of an									
Application Number		(MM/DD/YYYY)								
60/440,831	01/17/2003		Additi	onal provisional application						
				ers are listed on a						
			• •	emental priority data sheet 68/02B attached hereto.						

[Page 1 of 2]

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application.													
U.S. Parent Application or PCT Parent Number							Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)		
Additional	U.S. or I	PCT international	applica	tion nu	mbers are	listed on	a sup	plemental	priority data	sheet PT	D/SB/0	2B attached h	ereto.
As a named inv	entor, I h	ereby appoint th	e follow	ing regi	stered pra	ctitioner(s	) to p	rosecute t	his applicatio	n and to I	ransac	t all business	in the Patent
and Trademark	Office co	nnected therewi	th: 🗵	Custor	ner Numb	er	24:	265		<b></b>		Place Custo	
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Additional	registere	d practitioner(s)	named o	on supp	lemental l	Registered	Prac	titloner In	iormation she	et PTO/S	B/02C	attached here	to.
☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  Direct all correspondence to: ☐ Customer Number or Bar Code Label								ress below					
Name	Rot	obert A. Franks Reg. No. 28,605											
Address		***											
Address								<del></del> T					
City							s	tate		ZIP			
Country		Telephone (90						8-2908		Fax		) 298-5388	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of So	ole or F	irst invento	r:					A petitio	n has been	filed for	this ur	signed inve	ntor
Gi	ven Nar	ne (first and m	iddle [i	f anyl)					Family	/ Name d	or Surr	name	
Paul M.													
Inventor's Signature		-1€	$\supseteq$	m	By		2	>_				Date	14 JAN 2004
Residence: (	City	Wayne			State 1	۷J		ountry	USA			Citizenship	USA
Post Office A	ddress	11 Birkett Court											
Post Office A	ddress			_									
City		Wayne	State	NJ		ZIP	07	470		Coun	try	USA	
Additional	invento	rs are being na	med o	n the	2 sup	plementa	I Add	ditional Ir	nventor(s) s	heet(s)	PTO/S	B/02A attac	hed hereto

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Given Name (first and middle [if any]	Family Name or Surname							
Jun		j'	Chei	n				
Inventor's Signature						Date 14 Jan. 2004		
Residence: City Warren	te NJ		Country USA	Citizenship USA				
Mailing Address 22 Schindelar Woods Way						<u> </u>		
Mailing Address					,			
City Warren	Stat	te_NJ		<b>ZIP</b> 07059	Count	y USA		
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any]	)			Family N	lame or S	Surname		
David Kenyon								
Inventor's Signature Date 16 Jan								
Residence: City Morristown	<sub>te</sub> NJ		Country USA		Citizenship USA			
Mailing Address 4 Log Road	•							
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City Morristown State NJ				ZIP 07960 Country USA				
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Barry N. Lutsky								
Inventor's Signature		_				Date		
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Mailing Address 31 Longfield Drive								
Mailing Address								
City Hillsborough	lsborough State NJ					ountry USA		

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Mailing Address										
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